

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

RETURN SERVICE REQUESTED

DATA ENTRY DONE
REMAILED

3/11/98 *me*

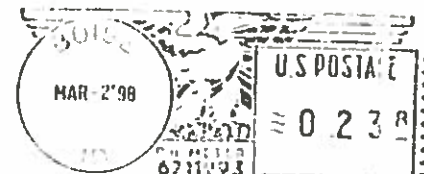
IMPORTANT WATER RIGHT INFORMATION

241 East 400 South

45-11791

BLAINE L HALFORD
RT 3 BOX 3456
BURLEY ID 83318

PRESTIGE
FIRST CLASS



RECEIVED

MAR 16 1998

Department of Water Resources

45-11791

83318 > 9384 28328



AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

DATE: SEP-9-1997

PAGE: A-1284

RIGHT NUMBER: 45-11791

NAME & ADDRESS: BLAINE L HALFORD
RT 3 BOX 3456
BURLEY ID 83318

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 09/18/1925

POINT OF DIVERSION: T11S R23E S15 NENE Within CASSIA County

PURPOSE AND PERIOD OF USE:	PURPOSE OF USE	PERIOD OF USE	QUANTITY
	DOMESTIC 1 HOME	01-01 12-31	0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T11S R23E S15 NENE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE
PARCEL NO. 11S23E150015

Claim procured by: CW

Date: 9-29

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM.

CIVIL CASE NUMBER: 39576

Ident. Number: A45-11791
Date Received: 7/03/1989
Receipt No: S008437
Received By:

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: BLAINE L. HALFORD 208-678-5967
Address: RT. 3, BOX 3456
BURLEY, ID 83318

2. Date of Priority: SEP 18, 1925

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	23E	15	NE	NE			CASSIA

5. Description of diverting works:
6" X 50' WELL, 1 HP PUMP.

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE.

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	23E	15	NE	NE		DOMEST	

11. Place of use in counties: CASSIA

A45-11791

Page 1

Date: 07/03/89

MICROFILMED
MAR 10 1993

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
NONE.

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Identification No. A45-11791
Date Received 66-05-89
Receipt Number 5008437

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day.

RECEIVED

JUN 5 1989

Department of Water Resources
Southern Region Office

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Blaine L. Halford Phone (208) 678-5967
Mailing Address RT #3 Box 3456 Burley, IDAHO Zip 83318
2. Date of Priority (Only one per claim) Sept. 18 1925 Month/Day/Year
3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source
4. Location of point of diversion is: Township 11 South Range 23 East of the Boise Meridian
Section 15, NE 1/4 of NE 1/4 of _____ 1/4, Govt. Lot _____, BM.,
County of CASSIA
Additional points of diversion if any: NONE
5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements, in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. 6" casing about 50 feet deep 1 horse power jet pump.
6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)
For Domestic purposes from 1-1 Month/Day to 12-31 Month/Day amount 0.04 (cfs)
(Both dates are inclusive)
For _____ purposes from _____ to _____ amount _____
7. Total quantity claimed 0.04 (cfs)
8. Total consumptive use claimed is de minimus
9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) 1 house hold

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MAR 10 1993

10. Place of use is: Township: 11 South Range 23 East of Boise Meridian

Section 15 NE 1/4 of NE 1/4, Govt. Lot _____, B.M.,

County of CASSIA for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

11. In which county (ies) are lands listed above as place of use located? CASSIA

12. Do you own the property listed above as place of use? Yes ☒ No _____

If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above. None ☒

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s) _____

Number of Attachments _____

By signing I/We acknowledge reading the notice on the back of this claim form.
I/We wish to receive for a small annual fee monthly copies of the docket sheet.
YES _____ NO _____

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) X Blaine L. Halford Date June 2, 1989

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/Idaho)

County of Cassia) SS.

Subscribed and sworn (or affirmed) before me this 2nd day of June 1989

SEAL

Notary Public Arthur L. Bush

Residing at Cassia Idaho

My Commission Expires 6-15-1992

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

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MAR 10 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Blaine L. Halford
Route 3, Box 3456
Burley, Idaho 83318

RECEIVED

JUL - 3 1989

RE: SRBA Claim

Department of Water Resources
Southern Region Office

Dear Claimant:

Please find enclosed your claim and your check # 3135 for \$ 2500 which you submitted to our office. I am returning these pursuant to rule 10,4 of the Department's Adjudication Rules and Regulations. In checking your claim it appears that the following items need clarification:

- ☒ Item #2 Priority date (day/month/year)
- ☐ Item #4 Point of Diversion Legal Description
- ☐ Item #6 Uses descriptions
- ☐ Item #9 Description of Non-irrigation uses
- ☐ Item #10 Place of Use Legal Description
- ☐ Item #16 Signature & Notarization
- ☐ Improper fee (THE CORRECT FEE IS \$ _____)
- ☐ Other or Remarks

If you will make the necessary corrections and return your claim with the correct fee and a copy of this letter within 30 DAYS of the date of this letter, your filing will be considered timely and will not be assessed an additional late fee of \$ 50.00.

Sincerely,


Steve Clelland
Water Right's Agent

enc:

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MAR 10 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

Aug. 9, 1989

Re: A45-11791

BLAINE L HALFORD
RT 3 BOX 3456
BURLEY ID 83318

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

A handwritten signature in cursive script, appearing to read 'Judy Givens'.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED

MAR 10 1993

WATER RIGHT NUMBER - A45-11791

PREFIX TRANSLATION: ADJUDICATION CLAIM

+ - - - - - COMMENTS - - - - - +
NO COMMENTS FOUND

+ - - - - - ADJUDICATION RIGHTS DATES AND FLAGS AREA - - - - - +

COURT REPORT FILING	- 00/00/0000	FIELD INSPECTION MADE	- 00/00/0000	CIVIL CASE NUMBER	- 39576
OBJECTION FILED DATE	- 00/00/0000	FIELD INSPECTION FLAG	-	OLD CASE NUMBER	-
RESPONSE FILED DATE	- 00/00/0000	VERIFIED DATE	- 00/00/0000	OLD JUDICIAL DISTRICT	-
CLAIM RECEIVED DATE	- 07/03/1989	LAST AMENDED DATE	- 00/00/0000	TEMPORARY RIGHT	- P
PROOF DUE DATE	- 00/00/0000	PROOF MADE DATE	- 00/00/0000	WATER DISTRICT	-
LICENSED DATE	- 00/00/0000	RECEIPT NUMBER	- S008437	FEDERAL/STATE INDICATOR	- S
CLAIMS TAPE ERROR FLG	-	POU OWNERSHIP FLAG	- Y	PRESUMPTION FLAG	-
FEE EXEMPT FLAG	-	NAME CONNECTOR	-	NOTICE OF ERROR FLAG	-

11523E150015

DATA ENTRY
ENTERED 12-21-91 gml
CHECKED 2/14/92

"Verified By"
Topo Map/Ortho-PQ
ASCS Map
Watermaster Records
NAPP Photos
Field Exam
Other (See Remarks)
County Records
Witness Statement
Project Records
IDWR Records

VERIFIED
NOV 13 1991

PROOF
SEP 17 1991

CERTIFIED
DEC 23 1991
WATER EXAMINER